

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128406

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** 416 SUMMIT RIDGE PLACE, #214, LLC

**Current Principal Place of Business:**

7087 GRAND NATIONAL DRIVE  
SUITE 100  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

7087 GRAND NATIONAL DRIVE  
SUITE 100  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 98-0685653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LAVIGNE, JAMES R MR.  
7087 GRAND NATIONAL DRIVE  
SUITE 100  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** INDEPENDENT TRUST COMPANY LIMITED  
**Address:** C/O 7087 GRAND NATIONAL DRIVE, SUITE 100  
**City-St-Zip:** ORLANDO, FL 32819 US

**Title:** MGR  
**Name:** NIAMH MCDONALD, DIRECTOR, INDEPENDENT TRUS  
**Address:** HARMONY COURT HARMONY ROW  
**City-St-Zip:** DUBLIN 2 , IRELAND,

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** JAMES R. LAVIGNE

RA

03/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date